PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

appropriate All further	correspondence including ed below or directed other	ng the 1	Patent, advance or	ders and notification	of n	naintenance fees w pondence address;	/ill be and/or	mailed to the current (b) indicating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
20985	7590 01/19	/2010						· ·		
FISH & RICHARDSON, PC P.O. BOX 1022 MINNEAPOLIS, MN 55440-1022						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
			Chester Vistan (Dep			(Depositor's name)				
						(Signature)				
		4/1			//9/10	(Date)				
APPLICATION NO.	APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/718,497 11/19/2003				Alok Kumar 10559-875001 / P17394 8237					8237	
TITLE OF INVENTIO ORDERED MUTUAL E		ARALL	EL PROCESSIN	G OF EVENTS WI	THIT	N MULTIPLE EV	VENT	CONTEXTS MAINT	'AINING	
APPLN. TYPE	SMALL ENTITY	MALL ENTITY ISSUE FE		PUBLICATION FEE DU		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1510	\$300		\$0		\$1810	04/19/2010	
EXAMINER			ART UNIT	NIT CLASS-SUBCLAS						
NGUYEN, VAN H 2194				719-318000						
1. Change of corresponde CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Blakely, Sokoloff,									
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a						
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	А ТО В	E PRINTED ON	THE PATENT (print of	or typ	e)				
PLEASE NOTE: Unl recordation as set fort	ess an assignee is ident h in 37 CFR 3.11. Com	ified be	clow, no assignee of this form is NO	data will appear on t T a substitute for filing	he pa g an a	ntent. If an assign	ee is id	lentified below, the do	ocument has been filed for	
(A) NAME OF ASSIG		(B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Intel Cor	Santa Clara, California									
Please check the appropri	iate assignee category or	catego	ries (will not be pr	inted on the patent):		Individual 🛛 Co	orporati	on or other private gro	up entity Government	
4a. The following fee(s)	are submitted:		41	— '	•	se first reapply ar	y prev	iously paid issue fee	hown above)	
Issue Fee	A check is enclosed.									
Publication Fee (No small entity discount permitted) Advance Order - # of Copies				Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 22-266 (enclose an extra copy of this form).						
Advance Order - 1	or copies			overpayment, to I	Depos	sit Account Number	5 <u>0 2</u>	2-2666 (enclose ar	extra copy of this form).	
 Change in Entity State a. Applicant claim 	tus (from status indicate s SMALL ENTITY state		•	☐ b. Applicant is no	o long	ger claiming SMAI	LL ENT	ΓΙΤΥ status. See 37 CF	FR 1.27(g)(2).	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req	uired) v	vill not be accepted						e assignee or other party in	
Authorized Signature	an d	7	afla			Date	4//	(b)	-	
Typed or printed name	Edwin H. Tay	lor				Registration N	10. <u>2</u>	5,129		
This collection of inform an application. Confiden	ation is required by 37 C	FR 1.3 U.S.C.	11. The information 122 and 37 CFR	on is required to obtain 1.14. This collection is	or re	etain a benefit by the	he publ	ic which is to file (and to complete, includin	by the USPTO to process) g gathering, preparing, and	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.